PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10627669

CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY												
TOTAL CLAIMS			24					RATE	FEE		BATE	FEE
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			Alfminus 20=		* 4	2		X\$ 9=	360	OR	X\$18=	
INDEPENDENT CLAIMS			(3 minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2		TOTAL	411)	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	8-	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ,		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus *	*** /	F CL AIM	=		X42=		OR	X84=	
, ³	FINOT PRESE	INTATION OF WI	JUIN DEF	ENDEN	CEAIN			+140=		OR	+280=	1
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	*	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	12	. =		* X\$ 9=		OR	X\$18=	rge og er d
	Independent	* NTATION OF M	Minus	***	F.CL AIM	= .	1	X42=	7.1	OR	X84=	
	, , , , , , , , , , , , , , , , , , ,	147ATTORY OF 181	JETH CE DEI	LINDLIN	CLAIM	· <u></u>	ana.	+140=		OR	+280=	S
				*	19		1000	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	4.
		(Column 1)	. 1%			(Column 3))_		•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATÉ	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= 	4 2	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CLAIM	=		X42=	v	OR	X84=	,
L	, mor ricot	THAT ON W	OLIN CL DEI	LINDLIN	CLANVI		_	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OB.	TOTAL ADDIT. FEE	
		mber Previously P ober Previously Pa							propriate bo			